

SOARTM

i n t o a c t i o n !



Part Two

 **A** Communities That Care
Presentation Kit



Talking Points

Let's talk about why each of you took the time out of your busy schedule to be here today. Are you concerned about a special young person in your life? Was there a newspaper article that helped you realize that there's work that needs to be done in our community to help our young people grow up safe and healthy? Or did something—or someone—else motivate you to come to this presentation?

Take a few responses before moving on.

The reasons you've given have one thing in common—a concern for the future of our community and a desire to make that future brighter. Whether you're a parent, a grandparent, a teacher or a coach, I bet that everyone in this room has a vision for our young people.

Making that vision a reality is what I want to talk to you about today. The *Communities That Care* system is an initiative that's going to help make our community a place where young people can become the healthy, responsible adults we all want them to be. I'm going to explain what the *Communities That Care* system is, how it works and what it means for all of us.

● Talking Points continued

If your community has already begun the Communities That Care process, let participants know the name of the initiative.

Use the following Talking Points only if you used Part One. Otherwise go on to the next slide.

So far we've talked about providing opportunities, skills and recognition so that our young people become bonded to us and our community. That's the first step in helping to support our *Communities That Care* effort!

Notes

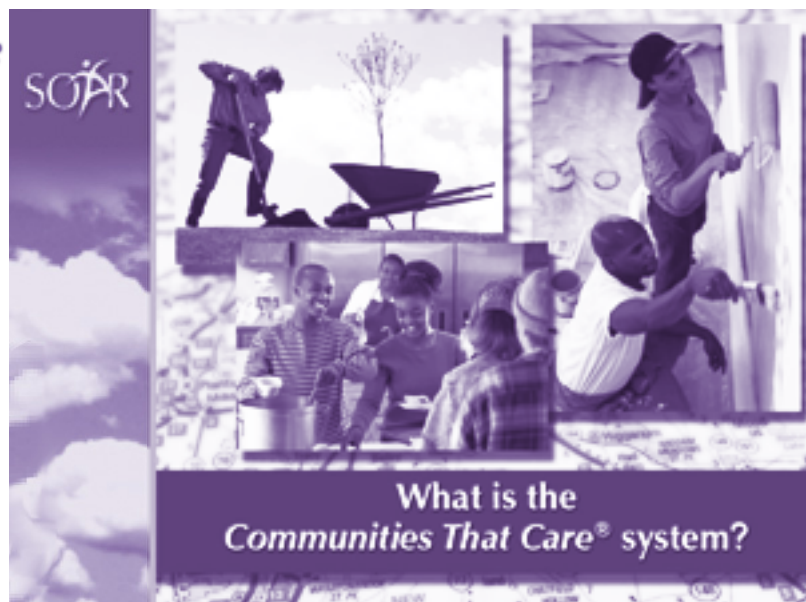
Key Source(s)

Hawkins, J. D., Catalano, R. F., Barnard, K. E., Gottfredson, G. D., Holmes, A. B., IV, Miller, J. Y., et al. (1992). *Communities that care: Action for drug abuse prevention*. San Francisco: Jossey-Bass.

Slide 2-2

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Talking Points

I'd like you to imagine that you've won a large sum of money and have the opportunity to build a house. You've picked out the perfect location and hired an architect. You have a clear vision of what you want. What's the first step you would ask the architect to take and why?

Take responses. Answer should be to design the house by creating a blueprint because a blueprint provides a plan for what work needs to be done.



Continue while automatic slide show runs.

A blueprint gives shape to your vision. It provides direction (or a framework, so to speak) to the people building your house. And it helps them identify what resources are going to be needed to make your vision a reality.

The *Communities That Care* system is also a type of blueprint, one that will help us shape our community into a healthy place for our young people.

It's designed to help us identify the unique strengths and challenges in our community, and reach the goals that we set for ourselves. It isn't a "cookie-cutter" or "one-size-fits-all" approach that's going to force us to make changes that aren't right for our community. Instead, it's an approach that focuses on our community's unique needs.

Let's see how this process is going to work.

Follow-Up Question(s)/Background Information

- 1 What have you heard or seen about the *Communities That Care* effort in our community?

Take a few responses. This is a good time to determine whether participants have any specific concerns about the Communities That Care system. Knowing this can help you anticipate questions that participants may have throughout the presentation.

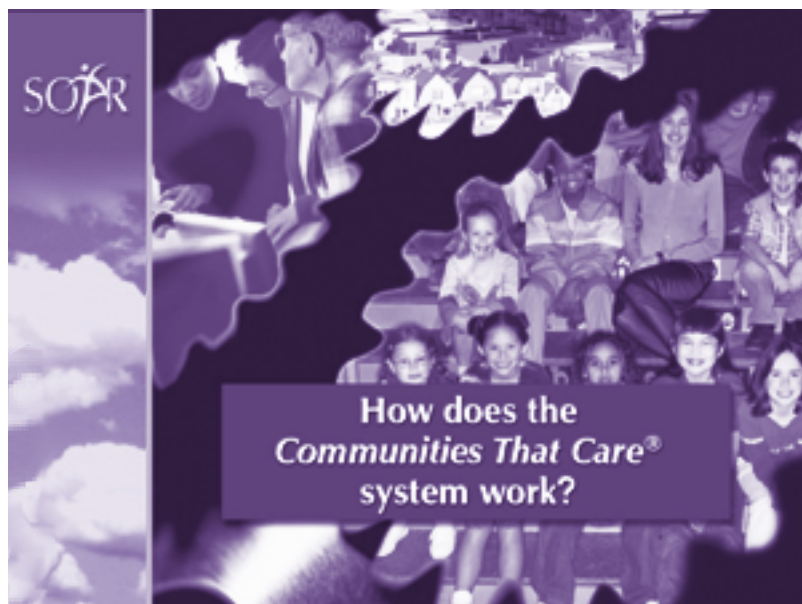
- 1 The *Communities That Care* system was developed by Dr. J. David Hawkins and Dr. Richard F. Catalano of the University of Washington's Social

Development Research Group.

Notes

Key Source(s)

Hawkins, J. D., Catalano, R. F., Barnard, K. E., Gottfredson, G. D., Holmes, A. B., IV, Miller, J. Y., et al. (1992). *Communities that care: Action for drug abuse prevention*. San Francisco: Jossey-Bass.



● Talking Points

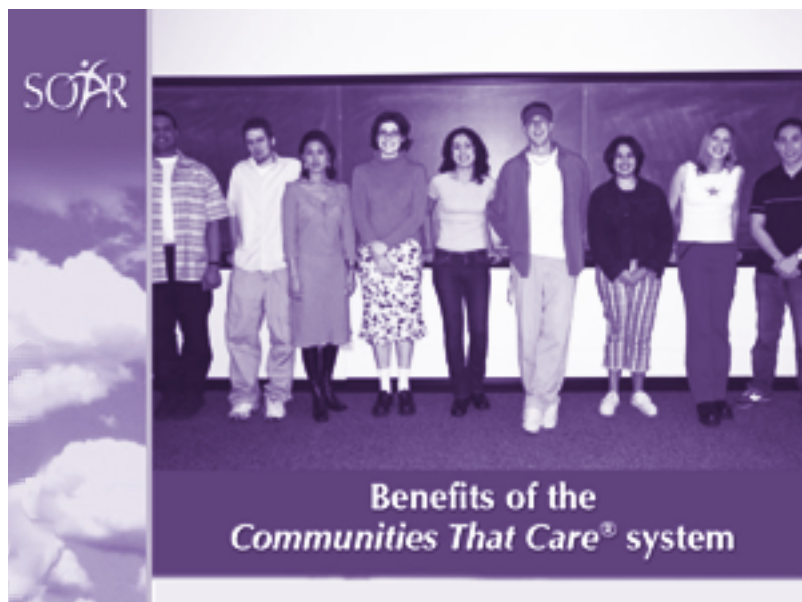
Nobody knows our community better than we do, and fortunately the *Communities That Care* system was designed with that fact in mind!

- The *Communities That Care* system helps all the parts of our community work together toward a common goal: the healthy development of our youth. This goal will be shared by people in our government, schools, law enforcement agencies and business community—as well as parents, youth and other community members.
- The *Communities That Care* system provides tools we need to make the right decisions for our youth. These tools help find people to lead our effort, teach us how to assess the risks, protection and resources in our community, and support the work that needs to get done at every step toward our goal.
- The *Communities That Care* system guides us in selecting the tested, effective programs, policies and practices to meet the specific challenges our community faces.
- Finally, the *Communities That Care* system increases community involvement. Everyone has a part to play, and that means no single person or group will have to address our challenges alone.

Key Source(s)

Jenson, J. M., Hartman, J. C., Smith, J. R., Draayer, D., & Schurtz, R. (1997, January). *An evaluation of Iowa's Juvenile Crime Prevention Community Grant Fund Program* (Report submitted to the State of Iowa Division of Criminal and Juvenile Justice Planning). Iowa City: University of Iowa, School of Social Work.

Office of Juvenile Justice and Delinquency Prevention. (1996). *1996 report to Congress: Title V incentive grants for local delinquency prevention programs* (Department of Justice Publication No. NCJ 165694). Washington, DC: Author.



Talking Points

Hundreds of communities across the country, as well as in the United Kingdom, the Netherlands and Australia, have already used the *Communities That Care* system as the foundation for their prevention efforts. **Why?**

Because it works!

Evaluations of the *Communities That Care* system have shown that communities using the system had a more focused and effective prevention effort. They also showed improved collaboration between agencies, reduced duplication of services and more involvement from community members—including youth—in prevention efforts.

Communities in Pennsylvania, Missouri, Tennessee, Oklahoma, Utah, Virginia, Michigan, Montana, Wisconsin and other states have seen results with their own prevention efforts. For example, various communities have seen grades go up, and truancy, juvenile crime and vandalism go down. The *Communities That Care* system produces results that we'll be able to see!

Background Information

- 1 Let participants know that the University of Washington's Social Development Research Group is currently conducting an outcome evaluation of the *Communities That Care* system.

The Community Youth Development Study is a 5-year randomized study to examine the impact of the *Communities That Care* process on risk factors,

protective factors and problem behaviors. The project is being funded by the National Institute on Drug Abuse, with funding support from the Center for Substance Abuse Prevention, the National Cancer Institute, the National Institute of Mental Health and the National Institute of Child Health and Human Development.

Notes

Key Source(s)

Office of Juvenile Justice and Delinquency Prevention. (1997). *1997 report to Congress: Title V incentive grants for local delinquency prevention programs* (Department of Justice Publication No. NCJ 170605). Washington, DC: Author.

Jenson, J. M., Hartman, J. C., Smith, J. R., Draayer, D., & Schurtz, R. (1997, January). *An evaluation of Iowa's Juvenile Crime Prevention Community Grant Fund Program* (Report submitted to the State of Iowa Division of Criminal and Juvenile Justice Planning). Iowa City: University of Iowa, School of Social Work.



Do we need the
Communities That Care® system?

● Talking Points

Is the *Communities That Care* system something that our community really needs? Do we even have the types of problems that the *Communities That Care* system helps address?

To help answer these questions, I'd like you to think about another. Why do adults insist that young people wear a helmet and other safety equipment when they ride a bike or skateboard?

Take a few responses. Answers should include the idea that safety equipment prepares for problems before they happen.



→ *Continue as new slide appears.*

That's right. Safety equipment helps prevent serious problems, and that's what the *Communities That Care* system does, too. It's proactive. **It addresses the predictors of problem behaviors instead of waiting until the problems themselves occur.**

We know it's safer, easier and more cost-effective to use safety equipment than to deal with serious injuries from an accident on a bike or skateboard. The same benefits apply to using the *Communities That Care* system. It's better for kids, families, communities—as well as pocketbooks!

Notes

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Talking Points

The *Communities That Care* system works well because it's built on a solid foundation—in this case, a research foundation. Let's take a closer look at this foundation and what it means for our own prevention efforts.



Continue while automatic slide show runs.

How many of you can remember a time when the terms “low-fat” and “heart-healthy” weren't so widely used on food products? How about a time when most restaurants and workplaces weren't “smoke-free”? Why did these types of changes take place in so many communities?

Take responses until someone mentions heart disease.

A public health approach to the prevention of heart disease was adopted about 25 years ago. We have seen this approach with grocery stores and restaurants offering “low-fat, heart-healthy” foods; with the increasing numbers of “smoke-free” restaurants, workplaces and buildings; and with the availability and popularity of gyms and jogging tracks. All of these community-wide changes have led to healthier lifestyles.

The *Communities That Care* system follows the same public health approach to prevention. This approach begins with identifying the problem, just as public health officials identified heart disease as a problem.

Talking Points continued

The goal of the *Communities That Care* system is to prevent 5 problem behaviors: substance use, delinquency, teen pregnancy, dropping out of school and violence. And with the *Communities That Care* system, everyone has a part to play in helping our young people—from our community leaders to community members like you.

Follow-Up Question(s)/Background Information

- 1 In what other ways has the public health approach been adopted in our own community?

Take a few responses. Try to get people to identify any community-specific approaches to public health, such as targeting a reduction in violence, crime prevention or underage drinking.

Notes

Key Source(s)

Hawkins, J. D. (1999). Preventing crime and violence through Communities That Care. *European Journal on Criminal Policy and Research* 7, 443-458.



Talking Points

The next step in the public health approach is identifying risk and protective factors. Let's begin by looking at how protective factors work.

Using the heart disease example, we consider regular exercise a protective factor. It helps protect the heart by buffering it from the risks for heart disease. In the *Communities That Care* system, protective factors help buffer our young people from the risks for substance use, delinquency, teen pregnancy, dropping out of school and violence.

You can think of protective factors as a shield around a child that helps protect him or her from the effects of risk factors.



If you have not already covered the Social Development Strategy in Part One of this presentation, use the following Talking Points. If you have used Part One, remind participants that the Social Development Strategy organizes the research on protective factors and healthy youth development, then continue with slide 2-8.

The *Communities That Care* system organizes protective factors into a guiding road map called the Social Development Strategy. This allows us to see how we can help our young people get from birth to healthy, positive adulthood.

● Talking Points continued

Risks for children (such as the availability of drugs) can occur in families, schools and communities, and in relationships with their peers. In other words, children face risks every day.

Some children exposed to risks become involved in substance use, commit delinquent or violent acts, or drop out of school. Yet other children in similar situations don't develop problem behaviors. Why is this the case? The answer is simple—it's you! Studies show that even children in tough surroundings can grow up and have success if they are bonded to a caring, responsible adult who has healthy beliefs and clear standards for behavior. **When this happens, children are more likely to be successful in life!**

Young people are motivated to follow the healthy beliefs and clear standards you set for their behavior if they feel attached and committed to you—in other words, if they've bonded to you. So what creates these protective bonds?

- First, there must be opportunities for young people to be involved in their families, schools and communities in meaningful ways. Giving young people the opportunity to help prepare a meal or help coach some younger players or giving teen employees more responsibilities are all examples of opportunities.
- Second, for young people to take advantage of those opportunities, they need the skills to be successful. When providing opportunities, ask yourself, "What are the skills this young person will need to be successful at this task?"
- Finally, young people need recognition for their involvement. They also need corrective feedback when their performance is not up to standards. Recognition and corrective feedback provide the motivation to continue to contribute in positive ways.

Give participants a moment to look over the Social Development Strategy on the slide. Answer any questions they may have about skills, opportunities, recognition, and healthy beliefs and clear standards.

Key Source(s)

Hawkins, J. D. (1999). Preventing crime and violence through Communities That Care. *European Journal on Criminal Policy and Research* 7, 443-458.

Office of Juvenile Justice and Delinquency Prevention. (1996). *1996 report to Congress: Title V incentive grants for local delinquency prevention programs* (Department of Justice Publication No. NCJ 165694). Washington, DC: Author.



Talking Points

Let's pretend that you're a doctor and I'm your patient. What kind of information would you need to find out about me to help determine my risk for heart disease?

Take responses until participants name the risk factors for heart disease—age, a diet high in fat, lack of exercise, high blood pressure, a history of heart problems in the family, etc.

Information about age, diet and exercise is important because it helps determine the likelihood of someone having, or developing, heart disease. Risk factors for adolescent problem behaviors work the same way among the young people in our community.

A risk factor is simply a condition that increases the likelihood of something happening. Just as there are risk factors for heart disease, there are also risk factors for substance use, delinquency, dropping out of school, teen pregnancy and violence.

Knowing the risk factors for heart disease lets doctors develop interventions that target those risk factors before a heart attack happens. Similarly, knowing the risk factors for adolescent problem behaviors helps us target and reduce those risk factors before our young people become involved with such things as drug use or crime.

Based on a review of over 30 years of research, the developers of the *Communities That Care* system have identified 20 risk factors for adolescent problem behaviors. This is a dynamic list, meaning that risk factors are added as new research emerges.

Talking Points continued

Pass out the risk factor handout on pages 16-17. Highlight any risk factors that you've already identified as being prevalent in your community. Otherwise, give participants a few minutes to review and ask questions.

Background Information

- 1 If someone mentions the Search Institute's framework of 40 "developmental assets," let participants know that this is an alternative prevention effort that does not deal with risk factors. Instead, it uses 40 assets that promote positive youth development. The Search Institute encourages communities to work on strengthening these assets to help ensure positive youth development. The *Communities That Care* system takes a community's efforts much further. Research has found that the most effective way to promote positive youth development and prevent problem behaviors involves addressing both risk and protective factors. And that's exactly what the *Communities That Care* system does.

- 1 Explain to participants that risk factors are predictive, not prescriptive. Use the following example to illustrate:

Does anyone know someone who has smoked a pack of cigarettes every day, eaten bacon and eggs daily and has never exercised, but is healthy as an ox at 85? Exposure to risk factors for adolescent problem behaviors does not doom a young person to develop problem behaviors. It just increases his or her likelihood of developing problems in adolescence.

Notes

Key Source(s)

Howell, J. C., Krisberg, B., Hawkins, J. D., & Wilson, J. J. (Eds.). (1995). *A sourcebook: Serious, violent, and chronic juvenile offenders*. Thousand Oaks, CA: Sage.



Tested, effective programs, policies and practices



● Talking Points

The final step in the public health approach is implementing and evaluating interventions to target risk and protective factors.

In the example of heart disease, these interventions include the community-wide policies that we've discussed, such as more heart-healthy food choices and smoke-free restaurants and workplaces. These interventions showed positive results—they were proven to work.

As part of the *Communities That Care* process, we'll select, implement and evaluate tested, effective programs, policies and practices that will address the specific risk and protective factors that we find to be prevalent in our community.

When you hear that programs, policies and practices are tested, effective, it means that they have met certain standards. All programs, policies and practices used as part of the *Communities That Care* process meet these standards:

- High-quality evaluations have shown that the programs, policies and practices have positive effects on substance abuse, delinquency, teen pregnancy, dropping out of school and/or violence among youth.

● Talking Points continued

- They address one or more risk factors for substance abuse, delinquency, teen pregnancy, dropping out of school or violence; or they increase one or more protective factors by strengthening healthy beliefs and clear standards or building bonding by providing opportunities, skills and recognition.
- They intervene at a developmentally appropriate age and are intended to benefit children and youth from before birth to age 21.
- They are all currently available for implementation—that is, the program, policy or practice is currently operating and has program materials available for distribution.

Tested, effective programs have been proven to work, which is to say that they will bring about the kind of changes that will help lead to a healthy, positive future for our young people. Using tested, effective programs will help us to use our limited resources more wisely.

Notes

Key Source(s)

Hawkins, J. D., Catalano, R. F., & Arthur, M. W. (2002). Promoting science-based prevention in communities. *Addictive Behaviors*, 27, 951-976.



Talking Points

Now let's take a closer look at how the *Communities That Care* system works and what's happened so far in our community.

There are five phases in the *Communities That Care* process, each represented by one of the points on this star.



During Phase One, "Getting Started," **a community finds people to lead the effort, defines the scope of its effort, gets any resources it's going to need and determines how ready it is to move forward.**

Go over the details of any work planned or completed for Phase One, such as how you defined your community, what readiness issues you faced and what steps you took to resolve them. You should also go over any outstanding issues that are yet to be resolved. This is also a good time to introduce other people who are involved in the Communities That Care effort, such as the Champion and the Coordinator.



"Organizing, Introducing, Involving" is the second phase in the *Communities That Care* process. During this time, those leading the *Communities That Care* effort learn how the process works and what their jobs will include.

There are two groups that head up the *Communities That Care* effort:

- Key Leaders (mayor, police chief, religious leaders, etc.) oversee the *Communities That Care* process.
- The Community Board carries out the work of the *Communities That Care* process.

Talking Points continued

[Name your Key Leaders and Community Board members if they have been identified.]

Community Board members deal with a lot of important issues during this time. Let's take a look at two that are particularly important.

First, Community Board members develop a vision statement to help guide the community's prevention efforts. A vision statement captures where the community wants to be in the future—the goals a community has for its young people. The statement helps drive the process and direct the decisions, choices and actions the Community Board will be making.

Review the vision statement developed by your Community Board, if one has been completed. Also, review how the Community Board developed the statement, including what input it used from various community stakeholders.

The Community Board also finds ways to involve community members, including youth, in the community's prevention efforts.

Involving community members, especially youth, is an important way to gain a new perspective on the work that needs to be done and how to do it.

Review any work done on involving community members, including youth. Then, if possible, name community members involved in the effort and what work they are doing.

Notes

Key Source(s)

Hawkins, J. D., Catalano, R. F., Barnard, K. E., Gottfredson, G. D., Holmes, A. B., IV, Miller, J. Y., et al. (1992). *Communities that care: Action for drug abuse prevention*. San Francisco: Jossey-Bass.

Hawkins, J. D. (1999). Preventing crime and violence through Communities That Care. *European Journal on Criminal Policy and Research* 7, 443-458.



● Talking Points

During Phase Three, a community develops a community profile. In order to do this, Community Board members:

- collect and analyze data specific to the community's youth to help determine unique strengths and challenges
- look at the community's current resources for meeting the community's challenges and identify any gaps in available services.

If your community has completed, or is currently working on, Phase Three, go over any work completed to this point.

- 1 Use this opportunity to discuss any youth surveys your community will be using (or has already used) to collect data for your prevention efforts.

Notes

[illegible]

Key Source(s)

- Hawkins, J. D., Catalano, R. F., & Arthur, M. W. (2002). Promoting science-based prevention in communities. *Addictive Behaviors*, 27, 951-976.
- Pollard, J. A., Hawkins, J. D., & Arthur, M. W. (1999). Risk and protection: Are both necessary to understand diverse behavioral outcomes in adolescence? *Social Work Research*, 23(3), 145-158.



Talking Points

During Phase Four of the *Communities That Care* effort, communities create a Community Action Plan. This plan is key to implementing and evaluating tested, effective programs, policies and practices to address the community's unique needs.

To better understand how important this plan is, imagine that you're putting together a puzzle. You open the box and dump the pieces out only to find that the entire puzzle is white—there is no picture that will be made once the puzzle is put together.

Now imagine another puzzle that will have a picture of a house, a mountain and sunset. Which of these puzzles will be easier to put together and why?

Take responses. Answer should include that by starting with a clear picture of the goal, the steps toward reaching the goal are easier.

The overall goal we have in mind is our community vision—what we want for the youth in our community. We identify the problem behaviors and the risk and protective factors we need to address in order to reach our vision. Then we identify the resources we have to address those factors. Finally, we fill in the gaps in existing resources with additional tested, effective programs, policies and practices.

All of this information—the whole picture of our puzzle—is spelled out in the Community Action Plan.



→ The final phase of the *Communities That Care* system is “Implementing and Evaluating the Community Action Plan.”

Talking Points continued

This is when the “rubber meets the road”—it’s the point at which we’ll be putting the programs, policies and practices that we have selected into place. Four important things happen during this phase.

- We’ll be developing plans to fund the Community Action Plan.
- Community Board members will develop plans to implement programs as they were designed to be implemented.
- Community Board members will develop plans to evaluate outcomes to ensure that programs are having the effects on risk and protective factors that they were designed to have.
- Finally, everyone involved in our *Communities That Care* effort will start to take the steps needed to sustain our effort as the programs go to work in our community.

Notes

Key Source(s)

Hawkins, J. D. (1999). Preventing crime and violence through Communities That Care. *European Journal on Criminal Policy and Research* 7, 443-458.

Office of Juvenile Justice and Delinquency Prevention. (1996). *1996 report to Congress: Title V incentive grants for local delinquency prevention programs* (Department of Justice Publication No. NCJ 165694). Washington, DC: Author.

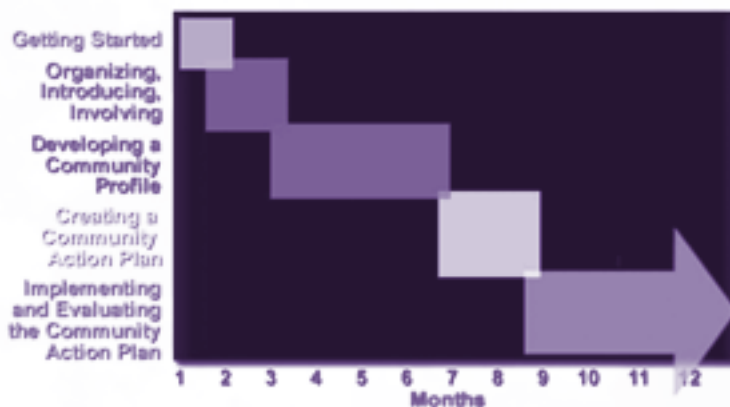
Slide 2-13

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The Communities That Care® time line

SOAR



Talking Points

Let's review a typical time line for the *Communities That Care* process.



The slide shows typically distinct periods for each phase, but every community is unique, so these time periods may overlap or vary greatly.

Go over your own community's time line, including how long it took for phases already completed, which phase your community is at right now, and, if possible, time estimates for the completion of remaining phases.

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Supporting the *Communities That Care*® effort

SOAR

- Stay informed.
- Practice the Social Development Strategy in your life.
- Get to know your community leaders.



Talking Points

Even with careful planning, we may encounter some obstacles as we move through the *Communities That Care* process. This is where you come in! For our *Communities That Care* effort to be successful, community members like you need to be involved. Here are some things you can do:



Stay informed about the *Communities That Care* effort. This presentation is a good first step, but be on the lookout for meetings and newspaper articles that provide more information as the effort progresses.



Practice the Social Development Strategy in your daily life by providing the young people in our community with opportunities, skills and recognition.



Get to know the community leaders who are involved in our *Communities That Care* effort. This is an evolving process, and we may need community support in new ways as the effort progresses. A good relationship between community leaders and community members can help ensure this support will be available.

The more community involvement we have, the more we can be sure that our *Communities That Care* effort will be successful.

Remember, every small step takes us closer to reaching our vision for young people.

Take several responses. Work with participants to think of ways that are specific to where you are in your Communities That Care effort or any readiness issues that you've encountered.

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Now you know where to start!

● Talking Points

Helping to develop a community that promotes positive and healthy development for all its young people may at first seem like a daunting task. But it can be done!

It all starts with the commitment you've shown by being here today!

Review what next steps the community will be taking.

I want to thank each of you for taking some time to see how we're helping our community's youth and making our community's future brighter.

Now let's go out and put what we've learned into action!

Remember to follow all conditions of the End-User License Agreement. If you have copied any files from the CD to a remote computer in compliance with the License Agreement, be sure to delete them from that computer after you have finished your presentation.

Background Information

- 1 Take as many questions as you have time for. Give as many audience members a chance to speak as you can. Don't let one person dominate the question-and-answer time. If you don't know the answer to a question, say so. (You may want to offer to find the answer at a later time, or direct the person to another source of information.)

Notes

SOAR into action!

Notes

[illegible]